


SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <i>Brenda Gale Blacklock</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
		B. Received by (Printed Name) <i>Brenda Gale Blacklock</i>	C. Date of Delivery <i>1-19-07</i>
 Montgomery City of Alabama City Clerks Office 103 N. Perry Street Montgomery, AL 36104		address different from item 1? <input type="checkbox"/> Yes or delivery address below: <input type="checkbox"/> No <i>STC</i>	
		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number <i>7006 2760 0002 8193 1934</i>			
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			